|                 | Application/Control No. | Applicant(s)/Patent Under Reexamination |  |  |  |
|-----------------|-------------------------|---|--|--|--|
| Index of Claims | 10537294                | OZIL, SAMUEL                            |  |  |  |
|                 | Examiner                | Art Unit                                |  |  |  |
|                 | SAMANTHA A MILLER       | 3749                                    |  |  |  |

| <ul><li>Rejected</li><li>Allowed</li></ul> |     | - Cancelled |            | celled     | N Non-Elected |                |         | A Ar |       | peal |       |    |        |
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| L  | □ c | laims re    | numbered i | in the sam | e order as pr | esented by ap  | plicant |      | ☐ CPA |      | ] T.C | ). | R.1.47 |
| CLAIM                                      |     |             |            |            |               | DATE           | DATE    |      |       |      |       |    |        |
|  | Fir | nal         | Original   | 08/02/200  | 8 01/29/2010  |                |         |      |       |      |       | _  |        |
|  |     |             | 1          | ✓          | ✓             |                |         |      |       |      |       |    |        |
|  |     |             | 2          | ✓          | ✓             |                |         |      |       |      |       |    |        |
|  |     |             | 3          | ✓          | ✓             |                |         |      |       |      |       |    |        |
|  |     |             | 4          | ✓          | ✓             |                |         |      |       |      |       |    |        |
|  | ·   |             | 5          | -          | -             |                |         |      |       |      |       |    |        |
|  | ·   |             | 6          | -          | -             |                |         |      |       |      |       |    |        |
|  | ·   |             | 7          | ✓          | ✓             |                |         |      |       |      |       |    |        |
|  |     |             | 8          | ✓          | ✓             |                |         |      |       |      |       |    |        |
| L  |     |             | 9          | ✓          | ✓             |                |         |      |       |      |       |    |        |
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